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OSTRAGER CH 250 PARK AVEN NEW YORK NY 08/08/2006 SSESHE2 00		BROITMA	AUG 07.20	180 AV	hereby certify that the states Postal Service addressed to the Ma ransmitted to the USI	rtificate of M his Fee(s) Tra with sufficien il Stop ISSU PTO (571) 27:	lailing or Trans insmittal is bein it postage for fir E FEE address 3-2885, on the o	smission g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.	
01 FC:2501	700.00 DP	PARADEMA		اغ الله	# Manett	Manette Dennis		(Depositor's name)	
				May May		Steller-		(Signature)	
			MAGEMA		August 1,	2006		(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED		D INVENTOR		DOCKET NO.	CONFIRMATION NO.	
10/049,992	10/07/2002		Andre B		Beaulieu		U 4 US	2610	
TITLE OF INVENTION: SO	OLID WOUND HEALING F	FORMULATIONS	S CONTAININ	NG FIBR	ONECTIN				
APPLN. TYPE	SMALL ENTITY	ISSUE FI	SSUE FEE		BLICATION FEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	YES	\$700			\$0	\$700		08/02/2006	
EXAMINER		ART UNIT		CLA	ASS-SUBCLASS]			
KIM, VICKIE Y		1618		514-310000		•			
Address form PTO/SB/1: "Fee Address" indical PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless	tion (or "Fee Address" Indica or more recent) attached. Use D RESIDENCE DATA TO B is an assignee is identified be a 37 CFR 3.11. Completion of	tion form of a Customer E PRINTED ON Tolow, no assignee	or agents O (2) the nam registered a 2 registered listed, no na FHE PATENT data will appe T a substitute fi	oR, alterned of a significant or a significant or a significant or a significant or filing	ngle firm (having as or agent) and the nan attorneys or agents. If be printed. type) e patent. If an assign	a member a nes of up to no name is	3 Manett	te Dennis document has been filed for	
4a. The following fee(s) are Issue Fee	e assignce category or category conclosed:	4b	o. Payment of F	Fec(s):	Individual Count of the fee(s) is encard. Form PTO-203	nclosed.(* #		oup entity Government	
Advance Order - # of		The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-3195 (enclose an extra copy of this form).							
a. Applicant claims S	(from status indicated above MALL ENTITY status. See 3	37 CFR 1.27.			longer claiming SMA				
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Authorized Signature Muddle			DateAugust 1, 2006						
Typed or printed name Manette Dennis			Registration No. 30, 623						
This collection of information an application. Confidential	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C.	11. The informatio 122 and 37 CFR	on is required to 1.14. This coll	o obtain ection is	or retain a benefit by estimated to take 12	the public wh minutes to co	ich is to file (an implete, includi	d by the USPTO to process) ng gathering, preparing, and	

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